



## MENTAL HEALTH PROBLEMS



Notes

Umang is a 26 year old young trainee in a multinational firm. This has been a dream job for her; however, she has been allotted the USA Project due to which most of the work is to be undertaken during late night hours. Alongwith, she has recently been engaged to her childhood friend. She is quite keen on meeting for dinners and party, but she is unable to undertake the same. Also, the burden at work is increasing. All of this is making her feel extremely low, and at time she feels nauseous also. She is losing interest in the job of her dreams and also at times does not feel like getting married. She is being guided to take care of her mental health by her friends and seek help of a psychologist. The mentioned example highlights the importance of taking care of mental health for overall wellbeing. Human beings are the most unique creatures of the universe. One of the major things that differentiate human beings from others is their capacity to think and feel. Healthy living is essential for every human being and mental health is an important precursor to happy healthy life.



### LEARNING OUTCOMES

After studying this lesson, learner :

- defines and describes mental health;
- identifies the various factors that can lead to poor mental health;
- enumerates the symptoms and causes of dealing with Anxiety, Depression, and Obsessive Compulsive Behaviour;
- delineates the ways to deal with Mental Health Issues; and
- effective strategies for maintaining health and well being.

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**23.1 MENTAL HEALTH: AN ESSENTIAL ENTITY**

Mental health is a state of balance between the individual and the surrounding world, a state of harmony between oneself and others, a co-existence between the realities of the self and that of other people and the environment.

World Health Organization defines mental health as a "state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community".

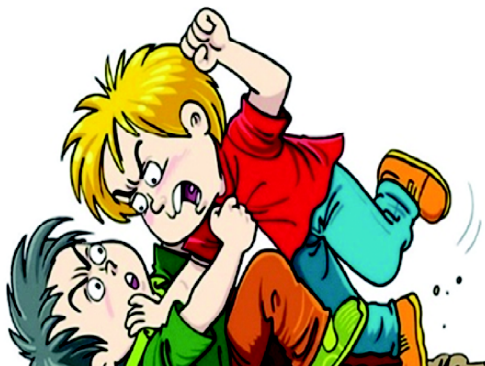
**23.1.1 Characteristics of A Mentally Healthy Person**

- He/She has an ability to make adjustments.
- He/She has a sense of personal worth, feels worthwhile and important.
- He/She solves his problems largely by his own effort and makes his own decisions.
- He/She has a sense of personal security and feels secure in a group, shows understanding of other people's problems and motives.
- He/She has a sense of responsibility.
- He/She can give and accept love.
- He/She lives in a world of reality rather than fantasy.
- He/She shows emotional maturity in his behavior, and develops a capacity to tolerate frustration and disappointments in his daily life.
- He/She has developed a philosophy of life that gives meaning and purpose to his daily activities.
- He/She has a variety of interests and generally lives a well-balanced life of work, rest and recreation.



**23.1.2 Signs of Poor Mental Health**

- Confused thinking
- Prolonged depression (sadness or irritability)
- Feelings of extreme highs and lows
- Excessive fears, worries and anxieties
- Social withdrawal
- Dramatic changes in eating or sleeping habits
- Strong feelings of anger
- Strange thoughts (delusions)
- Seeing or hearing things that aren't there (hallucinations)
- Growing inability to cope with daily problems and activities
- Suicidal thoughts
- Numerous unexplained physical ailments
- Irritability and short temper
- Aggression
- Substance use
- Poor concentration
- Being easily distracted
- Worrying more
- Finding it hard to make decisions
- Feeling less interested in day-to-day activities
- Frequent mood swings
- Feeling overwhelmed by things
- Tearfulness
- Tiredness and lack of energy
- Sleeping more or less
- Talking less and avoiding social activities
- Talking more or talking very fast, jumping between topics and ideas
- Finding it difficult to control your emotions
- Excessive Drinking



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**INTEXT QUESTIONS 23.1**

1. What do you understand by the mental health?
2. State common signs of Poor Mental Health.
3. State true or false
  - a. Mentally health person is able to solve his problems largely by his own effort and makes his own decisions. True/False
  - b. Individuals with Poor Mental health are able to adapt easily in social situations. True/False

**23.2 FACTORS THAT CAN LEAD TO POOR MENTAL HEALTH**

Many factors are responsible for the causation of mental illness. These factors may predispose an individual to mental illness, precipitate or perpetuate the mental illness.

**23.2.1 Predisposing Factors**

These factors determine an individual's susceptibility to mental illness. They interact with precipitating factors resulting in mental illness.

- Genetic make up
- Physical damage to the central nervous system
- Adverse psychosocial influence

**23.2.2 Precipitating Factors**

These are events that occur shortly before the onset of a disorder and appear to have induced it.

- Physical stress
- Psychosocial stress

**23.2.3 Perpetuating Factors**

These factors are responsible for aggravating or prolonging the diseases already existing

in an individual. Psychosocial stress is an example. Thus, etiological factors of mental illness can be:

- Biological factors
- Physiological changes
- Psychological factors
- Social factors

#### 23.2.4 Biological Factors

- **Heredity-** What one inherits is not the illness or its symptoms, but a predisposition to the illness, which is determined by genes that we inherit directly. Studies have shown that three-fourths of mental defectives and one-third of psychotic individuals have unfavorable heredity.
- **Biochemical Factors-** Biochemical abnormalities in the brain are considered to be the cause of some psychological disorders. Disturbance in neurotransmitters in the brain is found to play an important role in the development of certain mental disorders.
- **Brain Damage-** Any damage to the structure and functioning of the brain can give rise to mental illness. Damage to the structure of the brain may be due to one of the following causes: E.g. Infection of brain, injury of brain tissue, disturbance in blood glucose levels, lack of oxygen, and fluid and electrolyte imbalance, brain tumor.

#### 23.2.5 Physiological Changes

It has been observed that mental disorders are more likely to occur at certain critical periods of life namely-puberty, menstruation, pregnancy, delivery, period after birth. These periods are marked not only by physiological (hormonal) changes, but also by psychological issues that reduce the adjustment capacity of the individual. Thus, the individual becomes more susceptible to mental illness during this period.

#### 23.2.6 Psychological Factors

- It is observed that some specific personality types are more prone to develop certain psychological disorders. For example, those who are unsocial and



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reserved (schizoid) are vulnerable to schizophrenia when they face adverse situations and psychosocial stresses.

- Psychological factors like strained interpersonal relationships at home, place of work, school or college, bereavement, loss of prestige, loss of job, etc.
- Childhood insecurities due to parents with problematic personalities, wrongful attitude of parents (over-strictness, over leniency), abnormal parent-child relationship overprotection, rejection, unhealthy comparisons), deprivation of child's essential psychological and social needs, etc.
- Social and recreational deprivations resulting in boredom, and isolation.
- Marriage problems like forced bachelorhood, disharmony due to physical, emotional, social, educational or financial incompatibility, childlessness, too many children, etc.
- Sexual difficulties arising out of improper sex education, unhealthy attitudes towards sexual functions, guilt feelings about masturbation, pre and extra-marital sex relations, worries about sexual perversions.
- Stress, frustration and seasonal variations are sometimes noted in the occurrence of mental diseases.

**23.2.7 Social Factors**

- Poverty, unemployment, injustice, insecurity, migration, urbanization
- Alcoholism, gambling, multiple sexual partner, broken homes, divorce, very big family, religion, traditions, political turmoil and other social crises.



**INTEXT QUESTIONS 23.2**

1. Enumerate predisposing factor responsible for poor mental health?  
.....
2. Enumerate psychological factors leading to mental illnesses?  
.....

3. What are social factors affecting mental health of person?

.....

### 23.3 SYMPTOMS CAUSES AND WAYS OF DEALING WITH ANXIETY, DEPRESSION, AND OBSESSIVE COMPULSIVE BEHAVIOUR

Mental and behavioral disorders are understood as clinically significant conditions which are characterized by alterations in thinking, mood (emotions) or behavior associated with personal distress and/ or impaired functioning.

#### 23.3.1 Mood Disorder

The person who suffers from a mood disorder experiences these emotions for a long period of time in a restricted way, remains fixed at one emotion or fluctuates on the ranges of these emotions. For example, a person can be sad for days together or he/she can be sad one day and happy the other day regardless of the situation.

Thus, depending on the behavioural symptoms of the person mood disorders are of two types:

- (i) Depression and
- (ii) Bipolar disorder.

Mood disorders are characterized by disturbances in mood or prolonged emotional state. The main types of mood disorders include depression, mania and bipolar disorders. The most common mood disorder is depression, which covers a variety of negative moods and behavioural changes. In day-to-day life, we often use the term depression to refer to normal feelings after a significant loss, such as the break-up of a relationship, or the failure to attain a significant goal. People may experience the depression in different ways. It may interfere with your lifestyle, leading to impairment of function in various tasks and activity of your routine life. It can also influence relationships and some chronic health conditions. Major depressive disorder is defined as a period of depressed mood and/or loss of interest or pleasure in most activities, together with other symptoms which may include change in body weight, constant sleep problems, tiredness, inability to think clearly,



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agitation, greatly slowed behaviour, and thoughts of death and suicide. Other symptoms include excessive guilt or feelings of worthlessness. Factors predisposing towards depression: Genetic make-up, or heredity is an important risk factor for major depression and bipolar disorders. Age is also a risk factor. For example, women are particularly at risk during early adulthood, while for men the risk is highest in early middle age and old age people are likely to experience more depression. Similarly gender also plays a great role in this differential risk addition. For example, women in comparison to men are more likely to report a depressive disorder. Other risk factors are experiencing negative life events, loneliness and lack of social support.

### 23.3.2 Mania

People suffering from mania become euphoric or experience 'high', can be extremely active, excessively talkative, and are easily distractible. Manic episodes rarely appear by themselves; they usually alternate with depression which means after an episode of depression, an individual is likely to experience episode of mania. Such a mood disorder, in which both mania and depression are alternately present, is sometimes interrupted by periods of normal mood. This is known as bipolar mood disorder. Where two different mood episodes occur in the same patient but during different time period. In rare cases both the symptoms occur simultaneously which is known as mixed disorder. Bipolar mood disorders were earlier referred to as manic-depressive disorders. Among the mood disorders and severe depression, the lifetime risk of a suicide attempt is highest in case of bipolar mood disorders. Several risk factors in addition to mental health status of a person predict the likelihood of suicide. These include age, gender, ethnicity, or race and recent occurrence of negative life event.

### 23.3.3 Anxiety Disorder

You might have experienced fear and apprehension in your life. However, if somebody persistently becomes fearful, apprehensive, and anxious without any specific reason you may call this person as having anxiety disorders.

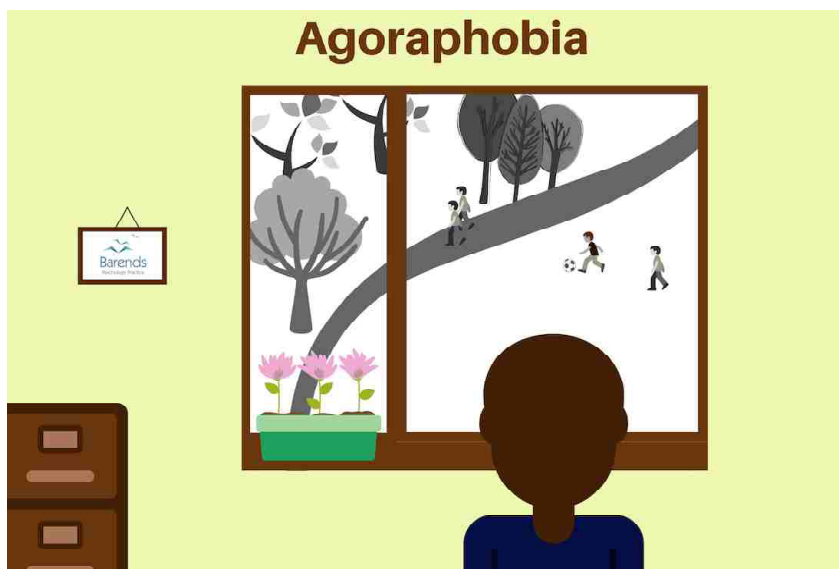
There are different kinds of anxiety disorders in which the feeling of anxiety manifest in different forms. They include generalised anxiety disorder, which consists of prolonged, excessive, unexplained and intense worry that is not attached to any particular object. The symptoms must prolong for at least six months for the diagnosis. The symptoms include worry and apprehensive feelings about the future; hypervigilance, which involves constantly scanning the environment for dangers. It is marked by motor



tension, as a result of which the person is unable to relax, is restless, and visibly shaky and tense. Another type of anxiety disorder is panic disorder, which consists of recurrent attacks of anxiety in which the person experiences intense terror. A panic attack denotes an abrupt surge of intense anxiety rising to a peak when thoughts of particular stimuli are present. Such thoughts occur in an unpredictable manner. The clinical features include shortness of breath, dizziness, trembling, palpitations, choking, nausea, chest pain or discomfort, fear of going crazy, losing control or dying. You might have met or heard of someone who was afraid to travel in a lift or climb to the tenth floor of a building, or refused to enter a room if s/he saw a lizard. You may have also felt it yourself or seen a friend unable to speak a word of a well-memorized and rehearsed speech before an audience. These kinds of fears are termed as phobias. People who have phobias have irrational fears related to specific objects, people, or situations. Phobias often develop gradually or begin with a generalized anxiety disorder. Phobias can be grouped into three main types, i.e. specific phobias, social phobias, and agoraphobia. Specific phobias are the most commonly occurring type of phobia. This group includes irrational fears such as intense fear of a certain type of animal, or of being in an enclosed space. Intense, incapacitating fear and embarrassment when dealing with others characterizes social phobias.



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Agoraphobia is the term used when people develop a fear of entering unfamiliar situations. Many agoraphobics are afraid of leaving their home. So their ability to carry out normal life activities is severely limited. Have you ever noticed someone washing their hands every time they touch something, or washing even things like

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coins, or stepping only within the patterns on the floor or road while walking? People affected by obsessive-compulsive disorder are unable to control their preoccupation with specific ideas or are unable to prevent themselves from repeatedly carrying out a particular act or series of acts that affect their ability to carry out normal activities. Obsessive behaviour is the inability to stop thinking about a particular idea or topic. The person involved, often finds these thoughts to be unpleasant and shameful. Compulsive behaviour is the need to perform certain behaviour over and over again. Many compulsions deal with counting, ordering, checking, touching and washing. Very often people who have been caught in a natural disaster (such as tsunami) or have been victims of bomb blasts by terrorists, or been in a serious accident or in a war-related situation, experience post traumatic stress disorder (PTSD). PTSD symptoms vary widely but may include recurrent dreams, flashbacks, impaired concentration, and emotional numbing.



**INTEXT QUESTIONS 23.3**

1. What are the type of mood disorder?  
.....
2. What are different types of anxiety disorder?  
.....
3. What are different types of phobia?  
.....

**23.4 MENTAL DISORDERS AND THEIR TREATMENT**

● **Preparation of case history**

The history of the particular disorder is prepared targeting the adjustment pattern of the client with family, friends, social and occupational set up.

● **Determination of the problem**

After preparing case history the psychotherapist identifies certain key problems which require urgent attention. This is achieved through administration of clinical tests and interview.

- **Therapeutic Session**

Depending on the nature and severity of the problem the psychotherapist conducts session with the client with a focused treatment plan. Progress after each session is monitored and assessed, and further interventions are modified if necessary.

- **Termination of Therapeutic Intervention**

Once it is confirmed that the sessions have yielded the desired outcome set by the psychotherapist then it is terminated. The client and the family members are asked to follow the suggestions at home and if required the client is asked to visit the psychotherapist again.



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**INTEXT QUESTIONS 23.4**

1. Explain different steps of treating mental disorder?

**23.5 EFFECTIVE STRATEGIES FOR MAINTAINING HEALTH AND WELL BEING**

Specific ways to promote mental health include according to WHO (World Health Organization)

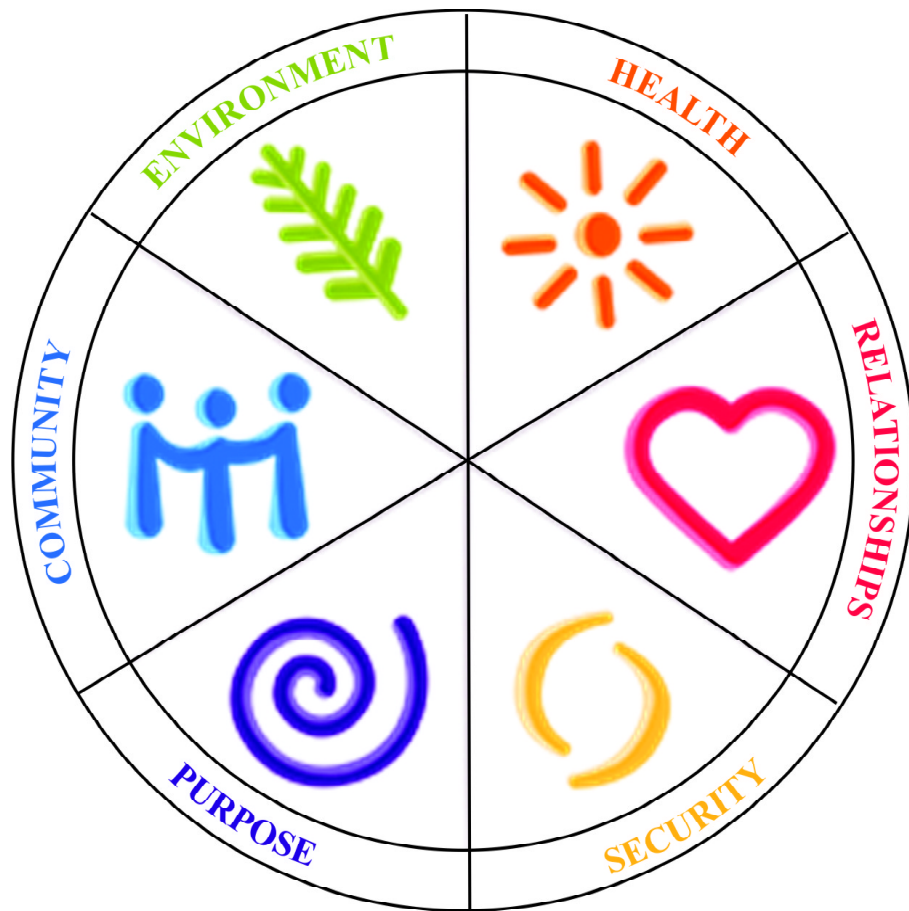
- Early childhood interventions (e.g. Providing a stable environment that is sensitive to children's health and nutritional needs, with protection from threats, opportunities for early learning, and interactions that are responsive, emotionally supportive and developmentally stimulating).
- Support to children (e.g. Life skills programmes, child and youth development programmes).
- Socio-economic empowerment of women (e.g. improving access to education and microcredit schemes).
- Social support for elderly populations (e.g. Befriending initiatives, community and day centres for the aged).
- Programmes targeted at vulnerable people, including minorities, indigenous people, migrants and people affected by conflicts and disasters (e.g. Psycho-social interventions after disasters).
- Mental health promotional activities in schools (e.g. Programmes involving supportive ecological changes in schools).

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- Mental health interventions at work (e.g. Stress prevention programmes).
- Housing policies (e.g. Housing improvement).
- Violence prevention programmes (e.g. Reducing availability of alcohol and access to arms).
- Community development programmes (e.g. integrated rural development).
- Poverty reduction and social protection for the poor.
- Anti-discrimination laws and campaigns.



Promotion of the rights, opportunities and care of individuals with mental disorders.

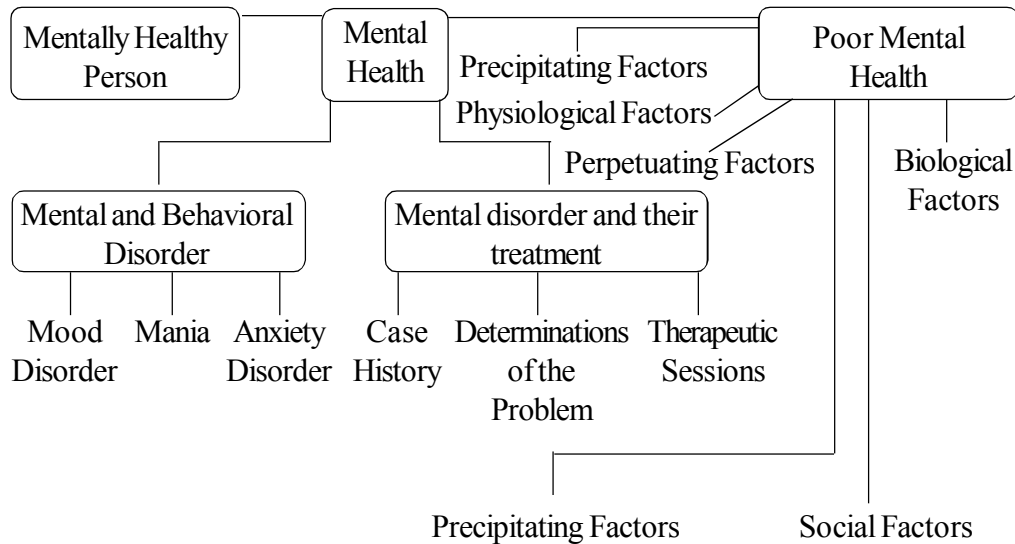


**ACTIVITY**

Carry out a campaign in your society to promote mental health?



### WHAT YOU HAVE LEARNT



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### TERMINAL QUESTIONS

1. Define Mental Health
2. Explain various characteristics of a Mentally Healthy Person.
3. Briefly discuss the Mental Disorders and their treatment.
4. Enumerate some effective strategies for maintaining Health and Well Being.
5. Identify the various factors that can lead to Poor Mental Health.
6. What are the different types of anxiety disorders and their clinical features?
7. Explain any two types of mood disorder and their characteristics as well as risk factors?
8. What are the steps involved in the process of psychotherapeutic intervention?
9. What are the different signs of poor mental health?
10. What are some of the psychological and social factors that can contribute to the development of mental disorders?

**ANSWERS TO INTEXT QUESTIONS**

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**23.1**

1. Mental Health is a state of balance between the individual and the surrounding world, a state of harmony between oneself and others, a co-existence between the realities of the self and that of other people and the environment.
2. Some common signs of poor mental health are using Substance use, Poor concentration, Worrying more, Finding it hard to make decisions, Feeling less interested in day-to-day activities, Low mood, Feeling overwhelmed by things, Tearfulness etc.
3. (a) True  
(b) False

**23.2**

1. Predisposing factors
  - Genetic make up
  - Physical damage to the central nervous system
  - Adverse psychosocial influence
2. Personality type, Interpersonal relationship, childhood issues and social problems.
3. Poverty, unemployment, injustice, insecurity, migration, urbanization ,alcoholism, gambling, multiple sexual partner, broken homes, divorce, very big family, religion, traditions, political turmoil.

**23.3**

4. Depression and Bipolar disorder.
5. Generalized anxiety disorder, Panic disorder and Phobia.
6. Specific phobia, social phobia and agoraphobia.

**23.4**

1. Phase of therapy
  - a Preparation of case history
  - b Determination of the problem
  - c Therapeutic Session
  - d Termination of Therapeutic Intervention